

Please complete this form and return to:

Texas Forensic Science Commission 1700 North Congress Avenue, Suite 445 Austin, Texas 78701 Email: info@fsc.texas.gov

[P] 1.888.296.4232[F] 1.888.305.2432

The Texas Forensic Science Commission ("FSC") is legislatively mandated to require crime laboratories that conduct forensic analyses to report professional negligence or professional misconduct to the Commission. (See Tex. Code Crim. Proc. 38.01 as amended by Tex. S.B. 1238, 83rd Leg., R.S. (2013)).

Please keep in mind that the FSC investigates matters subject to its statutory authority only. The term "forensic analysis" includes any medical, chemical, toxicological, ballistic, or other examination or test performed on physical evidence, including DNA evidence, for the purpose of determining the connection of the evidence to a criminal action. The term does not include the portion of an autopsy conducted by a medical examiner or other forensic pathologist who is a licensed physician. The term "crime laboratory" is defined in Article 38.35 of the Texas Code of Criminal Procedure to include "a public or private laboratory or other entity that conducts a forensic analysis subject to this article."

The FSC will examine the details of your disclosure to determine what level of review to perform, if any. All disclosures are taken seriously. Because of the complex nature and number of complaints and disclosures received by the FSC, we cannot give you any specific date by which that review may be completed. However, we aim to resolve all disclosures in a timely and expeditious manner, and to minimize disruption in the laboratory.

The Commission's statute allows it to withhold from disclosure information submitted in the context of an investigation but only until the final report is released. Upon release of the final report, all information provided to the Commission is subject to disclosure under the Texas Public Information Act ("PIA") (Texas Government Code Chapter 552).

**IMPORTANT:** If your disclosure involves a pending criminal matter(s), please be sure to indicate that on the form below because certain PIA exceptions may apply.

| 1. PERSON COMPLETING THIS FORM  | 3. WITNESSES  |
|---|---|
| Name:   | Provide the following about any person with factual |
| Laboratory:   | knowledge or expertise regarding the facts of the   |
| Address:  | disclosure. Attach separate sheet(s), if necessary. |
| City:   |   |
| State: Zip Code:  | First Witness (if any):                             |
| Home Phone:   | Name:   |
| Work Phone:   | Address:  |
| Email Address (if any):   | Daytime Phone:                                      |
| ZIIIIII I IOOLESS (I) WIIJ)   | Evening Phone:                                      |
| 2. SUBJECT OF DISCLOSURE  | Fax:  |
| List the full name, address of the laboratory, facility                         | Email Address:                                      |
| or individual that is the subject of this disclosure:                           | Second Witness (if any):                            |
| T 1: 1 1/T 1  | Name:   |
| Individual/Laboratory:  | Address:  |
| Address:  | Daytime Phone:                                      |
| City:   | Evening Phone:                                      |
| State: Zip Code:  | Fax:  |
| Year Laboratory Accreditation Obtained:   | Email Address:                                      |
| Name of National Accrediting Agency:  | Elitan Acciess.                                     |
| Date of Examination, Analysis, or Report:                                       | Third Witness (if any):                             |
| Type of Forensic Analysis:  | Name:   |
| Laboratory Case Number (if known):  | Address:  |
| Is the forensic analysis associated with any law enforce-                       | Daytime Phone:                                      |
| ment investigation, prosecution or criminal litigation?                         | Evening Phone:                                      |
| Yes No  | Fax:  |
| * If you answered "Yes" above, provide the following information (if possible): | Email Address:                                      |
| * Name of Defendant:  |   |
| * Case Number/Cause Number:<br>(if unknown, leave blank)                        |   |
| * Nature of Case:  (e.g burglary, murder, etc.)                                 |   |
| *The county where case was investigated, prosecuted or filed:                   |   |
| *The Court:   |   |
| *The Outcome of Case:   | ·   |
| * Names of attorneys in case on both sides (if known):                          |   |

# 4. DESCRIPTION OF DISCLOSURE Please write a brief statement of the event(s), acts or omissions that are the subject of the disclosure. See Page 6 of this form for guidance on what information should be disclosed to the Commission.

### 5. DESCRIPTION OF CORRECTIVE ACTION TAKEN

Please describe any corrective actions or corrective action plans the laboratory has developed to address the issues discussed in this disclosure. Please attach copies of the actions taken and/or future corrective plan to this disclosure form.

| Please let<br>General's<br>a contact | the Cor<br>Office,<br>name | mmissio<br>etc.) and | on kno<br>e also<br>phone | w if any<br>conducti<br>number | other and ing and in | ngencies<br>nvestiga<br>he ind | (e.g., Tation of ividual | exas R<br>the n<br>respon | kangers<br>natter i<br>nsible | , local<br>in que<br>for a | district<br>stion.<br>ny oth | attor<br>If pos<br>er in | ney, Insp<br>ssible, pr<br>svestigati | oector<br>ovide<br>on(s). |
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| 6. EXHIBITS AND ATTACHM | MENT(S) |
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| Whenever possible, disclosures should be accompanied by readable copies (NO ORIGINALS) of any laboratory reports, relevant witness testimony, affidavits of experts about the forensic analysis, or other documents related to your disclosure. Please list and attach any documents that might assist the Commission in evaluating the disclosure. Documents provided will NOT be returned. List of attachments: |
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| 7. YOUR SIGNATURE AND VERIFICATION  |
| By signing below, I certify that the statements made by me in this disclosure are true. I also certify that any documents or exhibits attached are true and correct copies, to the best of my knowledge.  |
| Signature: Date Signed:   |

# TEXAS FORENSIC SCIENCE COMMISSION • LAB DISCLOSURE FORM (Cont.) GUIDELINES FOR LABORATORY SELF-DISCLOSURE

One of the Commission's statutory duties is to require crime laboratories that conduct forensic analyses to report professional negligence or professional misconduct. (*See* Tex. Code Crim. Proc. 38.01 as amended by Tex. S.B. 1238, 83rd Leg., R.S. (2013).

This document is designed to provide guidance to laboratories in determining whether they should disclose particular events to the Commission. Any questions regarding these guidelines should be directed to the Commission's general counsel at **512.936.0770**.

### SELF-DISCLOSURE CATEGORIES

**Probation:** If the national accrediting body responsible for accrediting your laboratory and/or the Department of Public Safety¹ notifies you that it intends to put your laboratory on probation, you should inform the Commission as soon as possible, but no later than five (5) business days from receiving notification from the accrediting body.

Suspension of Accreditation: If the national accrediting body responsible for accrediting your laboratory and/or the Department of Public Safety notifies you that it intends to suspend your laboratory's accreditation for any reason, you should inform the Commission as soon as possible, but no later than five (5) business days from receiving notification from the accrediting body.

Nonconformances: Laboratories shall disclose any nonconformance that may rise to the level of professional negligence or misconduct using this disclosure form. Forms may be submitted online: http://www.fsc.state.tx.us/webform/disclosure. The disclosure should be submitted to the Commission as soon as possible, but no later than thirty (30) days after discovery of the nonconformance in question. If the laboratory needs a longer period to assess the scope of the nonconformance and submit its disclosure, it should contact the Commission's general counsel with a request for additional time.

If your self-disclosure involves a pending criminal case, or you believe that anyone involved in the disclosure may be the subject of criminal investigation, please alert the Commission when submitting your disclosure, as certain law enforcement exceptions to the Public Information Act may apply to the information submitted.

<sup>1</sup>DPS currently recognized the following accrediting bodies: (1) American Board of Forensic Toxicology (for accreditation of toxicology discipline only); (2) American Society of Crime Laboratory Directors, Laboratory Accreditation Board (recognized for accreditation of all disciplines that are eligible for accreditation); (3) Forensic Quality Services (recognized for accreditation of all disciplines that are eligible for accreditation); (4) Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (recognized for accreditation of toxicology discipline only in the sub-discipline of urine drug testing for all classes of drugs approved by the accrediting body); (5) College of American Pathologists (recognized for accreditation of toxicology discipline only; and (6) American Association for Laboratory Accreditation (recognized for accreditation of all disciplines that are eligible for accreditation).